



Please type a plus sign (+) inside this box

→ +

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number 10/658,035
		Filing Date September 9, 2003
		First Named Inventor Michael J. Wodjenski
		Group Art Unit TBA
		Examiner Name TBA
Total Number of Pages in This Submission		Attorney Docket Number ATMI-649

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>
<input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)		Remarks
<input type="checkbox"/> Extension of Time Request		
<input type="checkbox"/> Express Abandonment Request		
<input checked="" type="checkbox"/> Information Disclosure Statement		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Margaret Chappuis, Reg. No. 45,735
Signature	
Date	January 8, 2004

CERTIFICATE OF MAILINGI hereby certify that this correspondence is being deposited pursuant to 37 C.F.R. 1.8 in an envelope addressed to:
Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:

1-9-04

Type or printed name	Lee Ann Dilullo	Date	1-9-04
Signature			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



ATMI-649
CUSTOMER ID NO.: 25559

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Michael J. Wodjenski

Group Art Unit: TBA

U.S. Application No.: 10/658,035

Examiner: TBA

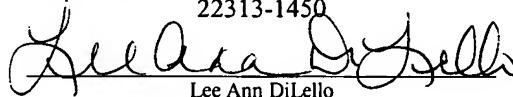
Filed: September 9, 2003

Title: AUTO-SWITCHING SYSTEM FOR SWITCH-OVER OF GAS STORAGE AND
DISPENSING VESSELS IN A MULTI-VESSEL ARRAY

CERTIFICATE OF MAILING

I hereby certify that this paper or fee is being deposited pursuant to 37 CFR 1.8

on the date indicated below and is addressed to the Commissioner of Patents, P.O. Box 1450, Alexandria, VA
22313-1450


Lee Ann DiLello

1 - 9 - 04

Date

INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Pursuant to 37 C.F.R. §1.56, the attention of the Patent and Trademark Office is hereby directed to the reference(s) listed on the attached PTO-1449. It is respectfully requested that the information be expressly considered during the prosecution of this application, and that the reference(s) be made of record therein and appear among the "References Cited" on any patent to issue therefrom.

1. This Information Disclosure Statement is being filed within three months of the U.S. filing date OR before the mailing date of a first Office Action on the merits. No certification or fee is required in accordance with 37 CFR § 1.56 and § 1.97(b).

- 2. This Information Disclosure Statement is being filed more than three months after the U.S. filing date AND after the mailing date of the first Office Action on the merits, but before the mailing date of a Final Rejection or Notice of Allowance.
 - a. I hereby certify that each item of information contained in this Information Disclosure Statement was the first citation of such item by a foreign patent office in a counterpart foreign application, which occurred no more than three months prior to filing the Information Disclosure Statement. 37 C.F.R. §1.97(e)(1).
 - b. I hereby certify that no item of information in this Information Disclosure Statement was cited in a communication from a foreign patent office in a counterpart foreign application or, to my knowledge after making reasonable inquiry, was known to any individual designated in 37 CFR §1.56(c) more than three months prior to the filing of this Information Disclosure Statement. 37 C.F.R. §1.97(e)(2).
 - c. Attached is our check no. ____ in the amount of \$180 in payment of the fee under 37 C.F.R. §1.17(p). Please credit or debit Deposit Account No. 50-0860 as needed to ensure consideration of the disclosed information. Two duplicate copies of this paper are attached.
- 3. This Information Disclosure Statement is being filed more than three months after the U.S. filing date and after the mailing date of a Final Rejection or Notice of Allowance, but before payment of the Issue Fee. Applicant(s) hereby petition(s) that the Information Disclosure Statement be considered. Attached is our check no. ____ in the amount of \$130.00 in payment of the petition fee under 37 C.F.R. §1.17(i)(1). Please credit or debit Deposit Account No. ____ as needed to ensure consideration of the disclosed information. Two duplicate copies of this paper are attached.
 - a. I hereby certify that each item of information contained in this Information Disclosure Statement was the first citation of such item by a foreign patent office in a counterpart foreign application which occurred no more than three months prior to filing the Information Disclosure Statement. 37 C.F.R. §1.97(e)(1).
 - b. I hereby certify that no item of information in this Information Disclosure Statement was cited in a communication from a foreign patent office in a counterpart foreign application or, to my knowledge after making reasonable inquiry, was known to any individual designated in 37 CFR §1.56(c) more than three months prior to the filing of this Information Disclosure Statement. 37 C.F.R. §1.97(e)(2).
- 4. (other):

Applicant does not believe that any additional fee is due in connection with the foregoing.
However, any deficiencies may be charged to the deposit account 50-0860.

Respectfully submitted,



Margaret Chappuis
Registration No. 45,735
Agent for Applicant

Date: *January 8, 2004*
Advanced Technology Materials, Inc.
7 Commerce Drive
Danbury, CT 06810
Agent Ref: ATMI-649

JAN 12 2004

Sheet 1 of 1

PATENT & TRADEMARK OFFICE

FORM TO-1449

US Dept. of Commerce
Patent and Trademark Office

ATTORNEY DOCKET NO.

SERIAL NO.

ATMI-649

10/658,035

APPLICANT

Michael J. Wodjenski

FILING DATE

GROUP

September 9, 2003

TBA

INFORMATION DISCLOSURE STATEMENT
(use several sheets if necessary)

U.S. PATENT DOCUMENTS

EXAMINER INITIAL		PATENT NUMBER	ISSUE DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
	AA	5,518,528	5/21/1996	Tom, et al.			
	AB	6,101,816	8/15/2000	Wang, et al.			
		6,089,027	7/18/2000	Wang, et al.			
		6,343,476	2/5/2002	Wang, et al.			

FOREIGN PATENT DOCUMENTS

		DOCUMENT NUMBER	PUBLICATION DATE	COUNTRY	CLASS	SUBCLAS S	TRANSLATION YES	NO
							X (abstract only)	

OTHER DOCUMENTS (Including Author, Title, Journal-Date, Page Number, Etc.)

Continue on Page

EXAMINER	DATE CONSIDERED
----------	-----------------

EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP § 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to the applicant.